## ISDH 2003 Hospital Service Report

(Annual Report under Indiana Code 16-21-6)

## Illiana Surgery and Medical Center, LLC

City: Munster County: Lake Year: 2003

Provider Type: General Acute

| I. Inpatient Care               |   |     |     |                                 |  |
|---------------------------------|---|-----|-----|---------------------------------|--|
| Hospital Service<br>Description |   |     |     | Average Charge<br>Per Discharge |  |
| Burn Care                       | 0 | 0   | 0   | \$0                             |  |
| Cardiac Intensive               | 0 | 0   | 0   | \$0                             |  |
| ICU Med/Surg                    | 0 | 0   | 0   | \$0                             |  |
| ICU Neonatal                    | 0 | 0   | 0   | \$0                             |  |
| ICU Pediatric                   | 0 | 0   | 0   | \$0                             |  |
| Medical/Surgical                | 8 | 127 | 232 | \$12,343                        |  |
| Neonatal Intermed               | 0 | 0   | 0   | \$0                             |  |
| Obstetrics                      | 0 | 0   | 0   | \$0                             |  |
| Pediatric                       | 0 | 0   | 0   | \$0                             |  |

| Psychiatric     | 0  | 0   | 0   | \$0 |
|-----------------|----|-----|-----|-----|
| Rehabilitation  | 0  | 0   | 0   | \$0 |
| Substance Abuse | 0  | 0   | 0   | \$0 |
| Swing Beds      | NA | 0   | 0   | \$0 |
| Other Services  | 0  | 0   | 0   | NA  |
| Acute Subtotal  | 8  | 127 | 232 | NA  |
| Normal Newborn  | 0  | 0   | 0   | \$0 |

| II. Outpatient Visits                                  |       |                     |        |  |
|--|-------|---------------------|--------|--|
| Circulatory System                                     | 972   | Digestive System    | 1,028  |  |
| Endocrine System                                       | 2,348 | Injuries and Poison | 555    |  |
| Mental Disorder  | 55    | Musculoskeletal     | 3,081  |  |
| Neoplasms  | 1,009 | Nervous             | 1,043  |  |
| Respiratory  | 361   | Urinary             | 1,315  |  |
| Other/Unknown  | 6,796 | Total Visits        | 18,563 |  |
| Number of Visits to Emerg                              | 0     |                     |        |  |
| Percent of Emergency Department Visits of Total Visits |       |                     | 0.0%   |  |

## **Identification of Hospital Services**

Each hospital has identified if it has one or more of a standard list of 41 services. This list of services is updated annually by each hospital from the information initially requested by the Centers for Medicare & Medicaid Services when the hospital was initially certified for Medicare payment.

| N - Acute Renal Dialysis        | N - Alcohol/Drug Service    | Y - Anesthesia Services    |
|---------------------------------|-----------------------------|----------------------------|
| Y - Blood Bank                  | N - Burn Care Unit          | N - Chiropractric Service  |
| N - Coronary Care Unit          | Y - Dental Services         | Y - Dietetic Services      |
| N - Emergency Service           | N - Home Care Program       | N - Hospice                |
| Y - Inpatient Surgical Services | N - Intensive Care Unit     | Y - Laboratory(Clinical)   |
| Y - Laboratory(Anatomical)      | N - Long Term Care Unit     | N - Neonatal Nursery       |
| N - Nuclear Medicine Services   | N - Obstetrics Services     |                            |
| Y - Occupational Therapy        | N - Open Heart Surgery      | Y - Operating Room         |
| N - Optometric Service          | N - Organ Bank              | Y - Organ Transplant       |
| Y - Outpatient Service          | Y - Outpatient Surgery Unit | N - Pediatric Services     |
| Y - Pharmacy                    | Y - Physical Therapy        | Y - Postoperative Recovery |
| N - Psychiatric Services        | Y - Radiology(Diagnostic)   | N - Radiology(Therapeutic) |
| Y - Rehabilitation Services     | N - Respiratory Services    | N - Self Care Unit         |
| N - Shock Trauma                | N - Social Services         | N - Speech Pathology       |

| NA = | Not applicable | NMF = | No meaningful figure | NR = | Not reported |
|------|----------------|-------|----------------------|------|--------------|
|      |                |       |                      |      |              |

**Health Care Regulatory Services** 

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